

Commonwealth of Massachusetts

Center for Health Information and Analysis

## All Payer Claims Database Data Volume Reports

2008 - 2012

**March 2013** 

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: <a href="mailto:CHIA-APCD@state.ma.us">CHIA-APCD@state.ma.us</a>.

Thank you for your interest in the All Payer Claims Database.

QCC Insurance Company														
File	Submis sion													
Type*	Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	10,982	10982
PR	2011	0	0	12,632	0	10,849	12,797	0	0	13,760	0	0	13,992	64030
PR	2012	0	0	15,674	0	0	15,863	0	0	17,447				48984
ME	2009	0	0	0	0	0	0	0	0	0	0	0	133,058	133058
ME	2010	0	0	0	0	0	0	0	0	0	0	0	139,480	139480
ME	2011	148,202	151,507	152,554	154,831	156,338	158,134	164,140	166,551	169,019	172,876	188,993	192,962	1,976,107
ME	2012	235,159	241,036	247,035	255,180	261,700	268,148	287,425	294,784	302,047	309,330	316,591		3,018,435
PV	2011	0	0	0	0	77,092	76,596	76,592	76,592	76,592	76,592	76,591	76,581	613228
PV	2012	0	0	76,751	76,751	76,749	76,747	76,847	76,852					460697
MC	2008	6,605	7,569	7,570	8,381	8,278	8,380	9,493	8,997	9,138	10,480	7,958	9,637	102,486
MC	2009	8,891	9,671	10,216	10,491	9,825	11,005	10,544	10,096	10,288	10,759	10,658	11,264	123,708
MC	2010	10,332	10,944	12,779	11,375	10,721	11,282	10,977	10,585	10,795	11,309	11,425	11,201	133,725
MC	2011	10,821	11,244	14,391	11,203	12,824	12,901	11,668	13,178	13,388	14,259	13,226	13,212	152,315
MC	2012	12,904	15,445	16,008	0	14,806	14,544	13,276	15,387	0	16,576			118,946
РС	2008	57	60	64	139	119	0	0	0	0	0	0	0	439
РС	2009	190	199	205	190	0	163	181	148	194	205	169	208	2052
РС	2010	204	164	162	182	0	173	178	215	197	222	203	207	2107
PC	2011	870	751	0	731	814	0	0	798	780	0	0	0	4744
PC	2012	803	857	921	884	1,091	0	1,031	1,020	977	1,075	1,106		9765
DC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2012	0	0	0	0	0	0	0	0	0	0	0		0

\*Key: PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

## The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.









